



**State of Arizona
Constable Ethics, Standards & Training Board**

INSTRUCTIONS

- Complete this form by typing or printing all of the requested information. Use separate forms if you are filing multiple complaints and/or filing complaints against multiple constables.
- Be as complete as possible. Include your contact information and if your complaint arises from a court case, please identify the court and the case number.
- Use the Statement of Facts form on the next page to explain in your own words the circumstances that lead to your complaint. Provide as much detail as possible.
- Sign and date the Complaint form where indicated. Keep a copy of both forms and send one complete copy to the address shown below. You may also fax or e - mail your forms.
- If your contact information should change while your complaint is active, notify the Board immediately.

COMPLAINT

Name of Constable: _____

Precinct/Court: _____

Is this complaint related to a lawsuit? Yes _____ No _____

If Yes, Name of Court: _____ Case Number: _____

Name of Case: _____ v. _____

Your Name: _____ Phone: _____

Your Address: Street: _____

City: _____ Zip Code: _____

Signature: _____ Date: _____

STATEMENT OF FACTS

PO Box 13116, Phoenix, AZ 85002
Phone: (602) 602-343-6280 Fax: (602) 254-0969
Email – cestb@azcapitolconsulting.com
Web Page <https://cestb.az.gov>

